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**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**☐ Declaration  
Submitted with or  
initial filing☐ Declaration  
Submitted after  
initial filing**Attorney Docket No.**

65446-0082

**First Named Inventor**

Paul Thomas Ryan, et al..

**COMPLETE IF KNOWN**

Application No.

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**An Automated System For Excising Proteins From  
Two-Dimensional Electrophoresis***(Title of the Invention)*

the specification of which

☐ is attached hereto  
or☒ was filed on 17/Feb./2000, as United States Application Number or PCT International Application  
Number: PCT/GB00/00573 and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/120,471	17/Feb/1999	

Please type a plus sign in this box:

+

PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032  
Patent and Trademark Office; US DEPARTMENT OF COMMERCE

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### DECLARATION - Utility Or Design Patent Application

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number **010291**

Or

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label Here

Name	Registration Number	Name	Registration Number
JAMES F. KAMP	41,882		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to ☒ Customer Number 010291 or ☐ Correspondence Address below

Name	James F. Kamp, RADER, FISHMAN & GRAUER, PLLC				
Address	39533 Woodward Avenue, Suite 140				
City, State, Zip	Bloomfield Hills, Michigan 48304				
Country	US	Telephone	248-594-0656	Fax	248-594-0610

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
KEVIN		AUTON	

Inventor's Signature	<i>GBV</i>			Dated	
Residence: City	Huntingdon	State	Cambridgeshire	Country	U.K.
Citizenship	U.K.				
Post Office Address	42 Croftfield Rd., Godmanchester, Huntingdon, Cambridgeshire, PE29 2ED, U.K.				
City		State		Zip	
Country	UK				

☐ Additional inventors are being named on the supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PAUL THOMAS		RYAN	

Inventor's Signature	<i>Paul Ryan</i>			Dated	
Residence: City	Huntingdon	State	Cambridgeshire	Country	UK
Citizenship	U.K.				
Post Office Address	74 Owl End Gt. Stukeley, Huntingdon, Cambridgeshire PE17 5AQ, U.K.				
City		State		Zip	
Country	U.K.				

☐ Additional inventors are being named on the supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
DAVID		BYATT	

Inventor's Signature	<i>DBY</i>			Dated	
Residence: City		State	Cambridgeshire	Country	UK
Citizenship	U.K.				
Post Office Address	26 The Paddock, Eaton Ford, St. Neots, Cambridgeshire PE19 35A, U.K.				
City		State		Zip	
Country	U.K.				